

State of California—Health and Welfare Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

See Instructions on Back of Page 6
and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

88677006
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-9802; WITHIN CALIFORNIA CALL 1-800-952-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD 999 001 968	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address ARMOR ALL 4030 WEST CHANDLER., SANTA ANA, CA 92704		4. Generator's Phone (714 393-1494		A. State Manifest Document Number 88677006	
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES		6. US EPA ID Number GAD 042 245 001		C. State Transporter's ID 010384	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 213 698-0991	
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD WHITTIER, CA 90602		10. US EPA ID Number CAD 042 245 001		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID CIAD 042 245 001	
				H. Facility's Phone 213 698-0991	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. HAZARDOUS WASTE LIQUID N.O.S UN 1993 (WASTE CAR WAX) COMBUSTIBLE LIQUID		030	DM	01/1650	G
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
		a. ol			
		b.			
		c.			
		d.			
15. Special Handling Instructions and Additional Information PROFILE NUMBER A13814					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name MARLON DIAZ		Signature <i>[Signature]</i>		Month Day Year 10/5/90	
17. Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name ROBERT J CIRINGIENI		Signature <i>[Signature]</i>		Month Day Year 10/5/90	
18. Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name FRANK FORD		Signature <i>[Signature]</i>		Month Day Year 10/5/90	

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento, CA 95812